

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PTW	6784	9/20/00
O.I.P.E. CLASSIFIER	ME	4	10/4
FORMALITY REVIEW		71634	
RESPONSE FORMALITY REVIEW			10/23/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
Final	12/4/00
Original	10/23/00
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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